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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

Application Number	09/976,880
Filing Date	11-Oct-2001
First Named Inventor	Margaret Motamed
Art Unit	2625
Examiner Name	SCOTT A. ROGERS
Attorney Docket Number	EFIM0070C

ENCLOSURES (Check all that apply)

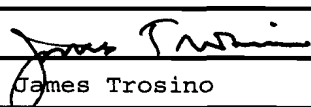
- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Reply
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<input type="checkbox"/> Affidavits/declaration(s)
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<input type="checkbox"/> Information Disclosure Statement

<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Reply to Missing Parts/
Incomplete Application
<input type="checkbox"/> Reply to Missing Parts
under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers

<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a
Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify
below):
1. RCE Request |
|---|--|--|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Law Office of James Trosino		
Signature			
Printed name	James Trosino		
Date	20-Nov-2006	Reg. No.	39,862

CERTIFICATE OF TRANSMISSION/MAILING

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